

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

		Amount of claim
3.1	Nonpriority creditor's name and mailing address Alison V. Holcombe 1124 Sunset Road Ann Arbor, Michigan 48103 Date or dates debt was incurred 9/5/18 Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Debt Holder Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes \$ 10,000.00
3.2	Nonpriority creditor's name and mailing address Allen D Dumont, MD 2484 Winged Foot CT. Ann Arbor, Michigan 48108 Date or dates debt was incurred 5/15/19,9/11/19 Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Debt Holder Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes \$ 50,613.68
3.3	Nonpriority creditor's name and mailing address David P. Nolan 200 Dorado Beach Dr #3722 Dorado, PR 00646 Date or dates debt was incurred Various Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Debt Holder Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes \$ 1,434,773.69
3.4	Nonpriority creditor's name and mailing address Dorothy Dawn Ricks 18 Osborn Farm Ln Wainscott, New York 11975 Date or dates debt was incurred Various Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Debt Holder Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes \$ 148,013.91
3.5	Nonpriority creditor's name and mailing address Gajanan Vithal Gandhe 704 Wellington, Hiranandani Estates Ghodbunder Road, Thane West 400607, India Date or dates debt was incurred 2/26/18 Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Debt Holder Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes \$ 38,707.83
3.6	Nonpriority creditor's name and mailing address Henry H Livingston 3 Anchorage Lane Marblehead, MA 01905 Date or dates debt was incurred 6/6/18, 10/11/18 Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Debt Holder Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes \$ 287,933.33

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.			Amount of claim
3. <u>7</u>	Nonpriority creditor's name and mailing address IRA Service Trust Company, CFBO Donald E. Elefson 225 E 46th Street New York, NY 10017 Date or dates debt was incurred <u>8/20/18</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed Basis for the claim: <u>Debt Holder</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	143,133.33 \$ <u> </u>
3. <u>8</u>	Nonpriority creditor's name and mailing address James Bosek 8 Waverly Road Darien, Ct 06820 Date or dates debt was incurred <u>3/24/20</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Debt Holder</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$ <u>113,589.04</u>
3. <u>9</u>	Nonpriority creditor's name and mailing address JKB Investments, LLC 3002 Apple Brook Lane Oatkon, VA 22124 Date or dates debt was incurred <u>8/20/18,6/26/19,3/6/20</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Debt Holder</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$ <u>385,546.88</u>
3. <u>10</u>	Nonpriority creditor's name and mailing address Joanne Stoner 551 S. Mutz Dr Columbus, IN 47201 Date or dates debt was incurred <u>9/14/18</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Debt Holder</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$ <u>141,466.67</u>
3. <u>11</u>	Nonpriority creditor's name and mailing address John E. Groman 2002 Trust dated 1/18/2002 441 Kings Road Cohasset, MA 02025 Date or dates debt was incurred <u>10/12/16</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Debt Holder</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$ <u>4,358,036.99</u>